



09/27/2004 14:08 FAX 9086547866

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Complete and send this form, together with applicable fee(s), to: Mail

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 06/28/2004

Lerner, David, Littenberg, Krumholz & Mentlik, LLP  
600 South Avenue West  
Westfield, NJ 07090-1497

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/878,465	06/11/2001	Vern A. Hult	MOFFAT 3.0-030	2684

TITLE OF INVENTION: PUMP DRIVE HEAD WITH STUFFING BOX

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/28/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
BOMAR, THOMAS S		3672	166-086100		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 LERNER, DAVID, LITTENBERG  
2 KRUMHOLZ & MENTLIK, LLP  
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Oil Lift Technology, Inc.

Canada

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) is enclosed:

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9/27/04

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09/28/2004 HDEMESS2 00000051 121095 09878465

01 FC:1501 1330.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 39.00 DA

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PTO/SB/97 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
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**FACSIMILE TRANSMISSION**

**ISSUE FEE TRANSMITTAL  
AND PUBLICATION FEE**

ATTORNEY DOCKET NO.: MOFFAT 3.0-030

APPLICATION NO.: 09/878,465

CONFIRMATION NO.: 2684

MAILING DATE OF NOTICE OF ALLOWANCE: June 28, 2004

FAX NUMBER: (703) 746-4000

PAGES INCLUDING COVER SHEET: 2

**PLEASE ACKNOWLEDGE RECEIPT TO SENDER AT (908) 654-7866.**

**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

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Arnold H. Krumholz; Reg. No. 25,428

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